



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



CONFIRMATION NO. 7258

Bib Data Sheet

SERIAL NUMBER 09/828,069	FILING DATE 04/05/2001 RULE	CLASS 707	GROUP ART UNIT 2177	ATTORNEY DOCKET NO. 027448.0006
APPLICANTS Dustin M. Davis, Round Rock, TX; Jane R. Garrison, Austin, TX;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 06/12/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 6	TOTAL CLAIMS 280	INDEPENDENT CLAIMS 12
ADDRESS John H. D'Antico Brobeck, Phleger & Harrison LLP 4801 Plaza on the Lake Austin, TX 78746				
TITLE Method and system for interacting with a biometric verification system				
FILING FEE RECEIVED 3120	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			
				<input type="checkbox"/> All Fees
				<input type="checkbox"/> 1.16 Fees (Filing)
				<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
				<input type="checkbox"/> 1.18 Fees (Issue)
				<input type="checkbox"/> Other _____
				<input type="checkbox"/> Credit



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7258

SERIAL NUMBER 09/828,069	FILING DATE 04/05/2001 RULE	CLASS 707	GROUP ART UNIT 2171	ATTORNEY DOCKET NO. 027448.0006
APPLICANTS Dustin M. Davis, Round Rock, TX; Jane R. Garrison, Austin, TX;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/12/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY TX	SHEETS DRAWING 6	TOTAL CLAIMS 280
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 12		
ADDRESS John H. D'Antico Brobeck, Phleger & Harrison LLP 4801 Plaza on the Lake Austin, TX 78746				
TITLE Method and system for interacting with a biometric verification system				
FILING FEE RECEIVED 3120	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	